



LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS  
LIQUEFIED PETROLEUM GAS COMMISSION

MARKET DEVELOPMENT ASSESSMENT

DEALER NUMBER	CLASS OF PERMIT	EXPIRES _____
Taxpayer Name and Address		Date: _____
_____		
_____		

FEE COMPUTATION

Prior Year Gross  
Sales of LP Gas From \_\_\_\_\_ To \_\_\_\_\_ Amount Due by: \_\_\_\_\_

\$ \_\_\_\_\_ X .0005 \$ \_\_\_\_\_

Return Original Form and  
Make Remittance Payable To:

Louisiana Department of Public Safety and Corrections  
Liquefied Petroleum Gas Commission

P.O. Box 66209  
Baton Rouge, La. 70896-6209  
(225) 925-4895

Signature \_\_\_\_\_

Title \_\_\_\_\_

( )  
Telephone No. \_\_\_\_\_

DO NOT MARK IN THIS AREA